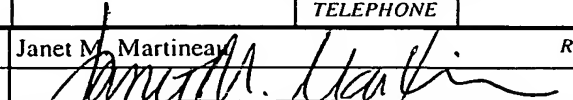


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PTO/SB/05 (08-00)

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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR ' 1.53(b))</small>		Attorney Docket No. <b>P2016P2</b>	
		First Inventor <b>Moore et al.</b>	
		Title <b>50 Human Secreted Proteins</b>	
		Express Mail Label No.	
<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>		<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small>  2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small>  3. <input checked="" type="checkbox"/> Specification [Total Pages <b>690</b> ] <small>(preferred arrangement set forth below)</small> - Descriptive title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix+ - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure  4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <b>2</b> ]  5. <input checked="" type="checkbox"/> Unexecuted Oath or Declaration Total Pages <b>3</b> a. <input type="checkbox"/> Unexecuted (original) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 17 completed)</small>  i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR ' ' 1.63(d)(2) and 1.33(b).  6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76. (6 pgs.)		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> a. <input checked="" type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input checked="" type="checkbox"/> paper (82 pgs.) <input checked="" type="checkbox"/> c. Statements verifying identity of above copies. Statement Under 37 C.F.R. § 1.821(f)	
<b>ACCOMPANYING APPLICATION PARTS</b>			
9. <input type="checkbox"/> Assignment Papers (cover sheet and document(s))  10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney  11. <input type="checkbox"/> English Translation Document (if applicable)  12. <input type="checkbox"/> Information Disclosure Statement/ Form PTO/SB/08 <input type="checkbox"/> Copies of Citations  13. <input type="checkbox"/> Preliminary Amendment  14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(should be specifically itemized)</small>  15. <input type="checkbox"/> Certified copy of Priority Document(s) <small>(if foreign priority is claimed)</small>  16. <input checked="" type="checkbox"/> Other: Submission of Formal Drawings and accompanying Figs. 1-2 (2 sheets)			
17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input checked="" type="checkbox"/> See Application Data Sheet <input type="checkbox"/> Continuation <input type="checkbox"/> Continuation-in-Part (CIP) Prior application information: Examiner _____ Group/Art Unit: _____ <small>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</small>			
<b>18. CORRESPONDENCE ADDRESS</b>			
<input checked="" type="checkbox"/> Customer Number or Bar Code Label <b>22195</b> or <input type="checkbox"/> Correspondence address below			
NAME _____			
ADDRESS _____			
CITY _____		STATE _____	ZIP CODE _____
COUNTRY _____		TELEPHONE _____	FAX _____
NAME (Print/Type) <b>Janet M. Martineau</b>		Registration No. (Attorney/Agent) <b>46,903</b>	
SIGNATURE 		Date <b>January 17, 2002</b>	

**FEE TRANSMITTAL**  
**for FY 2002**

Patent fees are subject to annual revision.

**Complete if Known**

Application Number	To Be Assigned
Filing Date	January 17, 2002
First Named Inventor	Moore et al.
Examiner Name	Not assigned
Group Art Unit	Not assigned
Attorney Docket Number	PZ016P2

Total amount of payment

**\$878.00****METHOD OF PAYMENT**

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **08-3425**Deposit Account Name **Human Genome Sciences, Inc.**

- ☒
- Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

- 2.
- ☐
- Payment Enclosed:

☐ Check ☐ Credit Card ☐ Money Order ☒ Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
101	740	201	370	Utility filing fee	\$740.00
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

**SUBTOTAL (1) \$740.00****2. EXTRA CLAIM FEES**

	Total Claims	Extra Claims	Fee from below	Fee Paid
Total Claims	23	-20**	3	\$18.00
Independent Claims	4	-3**	1	\$84.00
Multiple Dependent				\$280.00

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
103	18	203	9	Claims in excess of 20	
102	84	202	42	Independent claims in excess of 3	
104	280	204	140	Multiple dependent claim, if not paid	
108	84	209	42	Reissue independent claims over original patent	
110	18	210	9	Reissue claims in excess of 20 and over original patent	

**SUBTOTAL (2) \$138.00**

\*\* or number previously paid, if greater. For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Fee Code	Large Entity Fee (\$)	Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
112	920	112	920	Requesting publication of SIR prior to Examiner action	
113	1,840	113	1,840	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use hearing	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Statement	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	
145	100	145	100	Certificate of correction	
148	110	248	55	Statutory disclaimer	
561	3	561	3	Printed copy of patent, regular service	

Other fee (specify):

Other fee (specify):

\* Reduced by Basic Filing Fee Paid

**SUBTOTAL (3) \$0.00****Submitted By**

Name (Print/Type) Janet M. Martineau

Registration No.: 46,903

Complete (if applicable)

Telephone (301) 315-2723

Signature:

Date: JANUARY 17, 2002

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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